Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10623840

		CLAIMS AS	Columi)			mn 2)		SMALL EN		OR	OTHER SMALL	
TOTAL CLAIMS			33			** Sad		RATE	FEE	<b>I</b>	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			33_ minus 20= *		*12	*12		X\$ 9=			X\$18=	2-0
INDEPENDENT CLAIMS			# minus 3 = * 1							OR		234 c
MULTIPLE DEPENDENT CLAIM F			1/					X42=		OR	X84=	840
								+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				•	TOTAL		OR	TOTAL	068.
	C	LAIMS AS A	AMENDED - PART II				A			OTHER THAN		
		(Column 1)		(Colu		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	EPENDEN	T CLAIN			+140=			+280=	
+140= TOTAL										OR	TOTAL	
								ADDIT. FEE	<u></u>	OR	ADDIT. FEE	<u> </u>
_		(Column 1) CLAIMS			mn 2) HEST	(Column 3)						
AMENDMENT B	and the second second	REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1		
								+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY DFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
*	If the entry in cal-	ımn 1 ic loca than	the entry in a	olumn 2 wei	to "O" in o	oluma 3		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
	The "Highest Nur	mber Previously P	aid For" (Total	or Independent	dent) is th	ne highest numbe	er fo	und in the ap	propriate bo	x in c	olumn 1.	